

Tribal Tobacco Workplan SFY 2003

Tribe Name: _____

Instructions:

Step 1: Place a ✓ in the box beside the activity you plan to conduct during the SFY 2003 (July 1, 2002-June 30, 2003) contract period.

Step 2: Briefly describe what you will do to achieve this activity by the end of SFY 2003

Step 3: Submit the workplan for this objective with the workplans or any other objectives you plan to work on and submit it to your DOH contract manager by April 29, 2002 with a copy of the Face Page.

Objective 1 Increase Community Capacity for Prevention and Tobacco Control

☐ **Required activity - Community Advisors - T1.01**

Describe how activity will be achieved:

☐ **Youth Coalition/Advisors - T1.02**

Describe how activity will be achieved:

☐ **Adult or Youth Summit/Forum - T1.03.01**

Describe how activity will be achieved:

☐ **Regional Youth Summit - T1.03.02**

Describe how activity will be achieved:

☐ **Statewide Prevention Summit - T1.03.03**

Describe how activity will be achieved:

☐ Required activity - DOH State/Regional Contractor Meetings - T1.04

Describe how activity will be achieved:

☐ Other National, State, or Local Meetings and Trainings - T1.05

Describe how activity will be achieved:

☐ Volunteer Involvement - T1.06

Describe how activity will be achieved:

☐ Raising Awareness of Community Activities -T1.07

Describe how activity will be achieved:

☐ National Media Events - T1.08

Describe how activity will be achieved:

☐ Community Capacity Assessment - T1.09

Describe how activity will be achieved:

☐ Support Local Data Collection & Use - T1.10

Describe how activity will be achieved:

☐ Speak Out Initiative - T1.11

Describe how activity will be achieved:

☐ DOH-Sponsored Conference Calls - T1.12

Describe how activity will be achieved: